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PRIVILEGED COMMUNICATION**

Date: APRIL 17, 2004

To: EXAMINER <sup>SHAH</sup> ~~SHAW~~  
U.S. PATENT AND TRADEMARK OFFICE

Fax #: (703) 872-9314

From: DARRIN WESLEY HARRIS

Fax #: (847) 905-7111

Client/Matter No.: PHB 34,390 (7790/356)

# of Pages: 14  
(including cover sheet)

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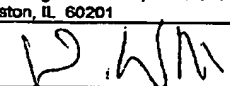
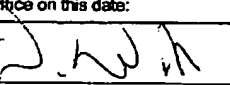
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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Attorney Docket No.	PHB 34,390 (7790/356)
	Application Number	09/630,896
	Filing Date	AUGUST 2, 2000
	First Named Inventor	TIMOTHY J. MOULSLEY
	Group Art Unit	2664
	Examiner	CHIRAG G. SHAH

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Response to Non-Final Office Action Dated November 17, 2003 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Two-Month Petition for Extension of Time Request (duplic) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Post Card Receipt <input type="checkbox"/> Additional Enclosure(s) (please identify below): <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.		
<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.138(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.		

## CALCULATION OF FEE

					Small Entity		or		Large Entity	
	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee		Rate	Add'l Fee	
Total		Minus		0	x \$9=	0		x \$18=		
Indep.		Minus		0	x \$43	0		x \$86		
First Presentation of Multiple Dep. Claim					+ \$145			+ \$290=		
					total add'l fee	\$ 0		total add'l fee	\$	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	DARRIN WESLEY HARRIS Registration No. 40,636 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature			Date April 17, 2004
CERTIFICATE OF FACSIMILE			
I hereby certify that this correspondence is being transmitted by facsimile to (703) 872-9314 to the U.S. Patent and Trademark Office on this date:			
			April 17, 2004
Signature			Date: April 17, 2004
DARRIN WESLEY HARRIS (40,636)			